

Mutual of Omaha Plan Insurance Frequently Asked Questions

Effective October 1, 2023, any girl, sibling, adult or anyone who is not currently enrolled as a Girl Scout member, but who has registered to participate in a Girl Scout meeting, trip, or any other gathering is covered under Basic Mutual of Omaha Activity Insurance. This insurance provides up to a specified maximum for medical expenses incurred as a result of an accident while participating in an approved, supervised Girl Scout activity.

1. What is the purpose of the Basic Plan?

A. To assure that every registered Girl Scout member or participant is automatically covered by accident or injury insurance during normal supervised program activities regardless of duration of activity/travel. Coverage is automatic for all Girl Scout Members and participants.

2. Is a new Member automatically covered under the Basic Plan when they joins Girl Scouts?

A. For new Girl Scouts, enrollment under the Basic Plan becomes effective once the troop leader has received all necessary enrollment paperwork and payment dues or once registration and payment has been submitted online.

3. What is considered a non-member parent/guardian, consultant or individual who is part of the Girl Scout activity?

A. If an individual has registered to attend an event or activity than they are considered to be a part of the GS activity. It does not make a difference if they are an enrolled Girl Scouts of Northern California member or not.

4. Are “Tagalongs” (brothers, sisters, friends) covered under the Basic Plan?

A. Yes. “Tagalong” means a person who is registered to attend an event or activity but is not of an age or skill level to participate.

5. What is considered a registered attendee or participant?

A. Someone who has signed-up to participate in advance and is on the event roster for the activity. Registered attendees must also have completed any required paperwork such as health-history forms or permission slips in relation to the activity being held, similar to a registered member of Girl Scouts of Northern California.

6. What is meant by an approved, supervised Girl Scout activity?

A. It is an activity carried out by registered Members of the Girl Scouts of Northern California, under supervision of adults, in keeping with the Girl Scout Program Standards, the Safety Activity Checkpoints and/or approved by council.

7. Is traveling to and from a group meeting or activity covered?

A. Yes, it is covered under the Basic Plan. The insurance includes travel to and from group meetings or activities, provided it is direct. The insurance does not cover accident or injury which occur during or after deviation from the direct route to or from the meeting

place. For example, a parent picks up a Member(s) from a meeting, then proceeds to the shopping mall before returning home, any accident or injury that might occur on the way to the shopping mall would not be covered.

8. Can non-member parents or other individuals be involved in providing transportation, chaperoning, or lending a hand during Girl Scout activities or field trips?

A. No. Girl Scouts of Northern California requires all adults volunteering with youth, regardless if they registered to participate in a specific individual event, be registered and paid members of Girl Scouts of Northern California, have completed and passed fingerprinted background screening and finger printed, have completed mandated reporter training, and completed other specific training or paperwork required for those duties.

9. Is it possible to purchase insurance for groups of non-member participants (including family members) for an approved, supervised Girl Scout activities?

A. Yes, however, optional coverage is not required for non-member participants as long as they are registered to attend the Girl Scout activity.

10. Are covered medical expenses under the Basic Plan payable regardless of the existence of other health insurance policies?

A. The Basic Activity Accident Plan is not intended to diminish the need for or replace family health insurance; however, the Plan does pay for the first \$140 in benefits. When \$140 in benefits has been paid, any

subsequent benefits for the same accident or injury will be payable only for covered medical expenses that exceed the limit of benefits available under other forms of insurance or health care programs ... up to the maximum of \$20,000. (This provision applies only to the medical expense benefits. The benefits for accidental loss of life, limb or eyesight are payable regardless of other insurance.)

11. When and how can sickness insurance be provided?

A. Sickness insurance is provided along with accident or injury insurance under one of the Optional Plan 3Ps, but it is not available for events lasting **less than three nights**.

12. Are pre-existing health conditions covered by Accident and Sickness Insurance?

A. No, only sickness which is contracted and for which treatment begins while the coverage for the participant is in force is covered. Many HMOs, PPOs and other medical plans require prompt notice; don't delay notifying the family's insurance carrier if a preexisting condition is or might be involved.

13. Would coverage be provided under the Basic Plan for medical expenses of a Member who became ill during an approved activity?

A. No. Sickness is not covered; only medical expense arising out of an accident or injury during an approved, supervised activity is covered. However, illness caused by an accident, such as a poisonous snake or insect bite, would be covered.

14. If a Member loses a filling or breaks a false tooth, a bridge or a brace, would the dental work be covered by Accident and Sickness Insurance?

A. No. Only dental treatment to sound, natural teeth damaged as a result of an accident is covered by the policy.

15. Are activities engaged in independently, that is, on their own, by one or more Members of the group covered under the Basic Plan?

A. No. Personal activities engaged in by Members, individually or in groups, on their own are not included within the meaning of “approved, supervised Girl Scout activity.”

*The Basic Plan of Activity Accident Insurance does not cover situations such as: (a) several Members who, apart from the Girl Scouts of which they are Members, are also personal friends or classmates and as such go swimming, camping, traveling to a recreation center or elsewhere; (b) a mother who is a volunteer who takes her daughter and her daughter’s friends, also Girl Scouts, on an outing; (c) two or three Girl Scouts of one group who, in the home of one, work on a project toward a badge without adult supervision; (d) some or all of the Girl Scouts on the way home after a troop meeting go to the movie or stop in at the mall.

16. Does the Basic Plan cover the delivery of Girl Scouting programs outside of the traditional Girl Scout group?

A. Yes. An example of such a program would be a Special Interest Group, which meets the criteria established for the activity to be considered Girl Scouting.

17. Are fundraising drives, money-earning events and program activities, such as cookie sales, covered?

A. Yes, they are covered under the Basic Plan, if they are approved, have proper supervision and all participants and attendees are registered for the event or activity. *Patrons of a cookie booth or who pass through a fundraising drive, are not considered participants, and therefore, are not covered.

18. When may Plan 3P be used for family camping?

A. If the camping program is 3-nights or longer, and is approved by council.

19. Is coverage provided under the Basic Plan if Members of our group travel outside the United States on a Girl Scout project or activity?

A. Yes.

20. A participant decides, while returning from a Girl Scout event, to visit a relative or friend who lives nearby. On the way to the relative or friend’s house or on the way back, the participant becomes injured in a car accident. Would the participant’s medical bills be covered?

A. No. Coverage only applies to accidents or injuries that occur while traveling directly to and from the covered activity. Side trips or visits are not covered.

21. If a Member is injured while individually practicing skills for a badge or learning a sport, such as individual roller skating or horseback riding, is she covered under the Basic Plan?

A. No. These are individual activities conducted outside of the Girl Scout group setting and not under the direct supervision of Girl Scout group leadership.

22. Suppose a group of campers, upon leaving camp and returning home, become ill as the result of food poisoning contracted while attending the event, would this be covered by Accident and Sickness Insurance?

A. Yes, if it can be shown that the group became ill due to food poisoning contracted during participation in the activity/event covered by Accident and Sickness Insurance.

23. The doctor treating the participants has prepared one bill for a group of injured people. Is it necessary to complete a separate Claim Form for each individual receiving treatment?

A. Yes. Even though payment will be made to one doctor or hospital, a Claim Form must be fully completed for each person including an accident or injury report for each injured party.

24. A participant falls while hiking along a trail during a Girl Scout approved event and hits her face on a rock breaking off two front teeth. Is the repair of the damaged teeth covered by this insurance?

A. Yes. Treatment received from a legally qualified dentist or surgeon for injuries to sound, natural teeth as a result of an ACCIDENT are covered. Coverage is only for such treatment received within the 52- week period immediately following the date of the accident unless, within that period, the dentist certifies that such dental treatment must be deferred. The estimated cost of the deferred treatment would be covered, but not to exceed the \$5,000 maximum deferred dental benefit for each accident.

25. How does Plan 3PI differ from Plan 3P?

A. Plan 3PI provides accident, injury and sickness insurance along with travel assistance services for trips or events which take place outside the USA. Plan 3P provides accident and sickness insurance as described in the Guide in section 3, for trips or events which take place in or out of the USA. However, keep in mind that Travel Assistance Services are not included under Plan 3P. Please note the return transportation and air ambulance expense benefits are provided by the AXA Assistance-USA Travel Assistance Coverage, and are higher than those under Plan 3P.

26. What are the additional AXA Travel Assistance Service benefits provided under Plan 3PI?

A. Pre-Trip Services, Travel Assistance Services, Technical Assistance Services and Medical Assistance Services. Medical Evacuation (which includes but is not limited to Return Transportation and Air Ambulance Services) and Repatriation services are payable up to a combined single limit of \$50,000. All services are subject to the terms and conditions of a service agreement with AXA Assistance-USA. Services must be provided by AXA Assistance-USA. No claims for reimbursement will be accepted.

27. When counting the number of days of an activity/ event on the Enrollment Form, do you include the beginning day and ending day of the event?

A. Yes. Since coverage for travel directly to and from an activity/event is covered, all days, including days traveled, should be included. For example, a group leaves home Friday afternoon and returns home Tuesday

morning. Coverage must be arranged for five calendar days.

28. What is the minimum premium per event?

A. There is no minimum premium per event. The \$5.00 minimum applies to each processed online submission of an Enrollment Form. More than one event may be listed on an Enrollment Form.

29. How can reimbursement be made when payment for treatment was provided, via a credit card, at the time of services rendered?

A. Reimbursement for eligible expenses under all Plans can be made by submitting a completed Claim Form (M18979), the providers diagnosis and a copy of the bill (charge slip) showing charges incurred for treatment.

30. Who are benefits paid to?

A. Unless a specific beneficiary designation has been made for this insurance and is on file with the company, the benefit for loss of life and other unpaid accrued benefits will be paid in accordance with the following surviving preference beneficiaries: (a) the Insured's spouse; (b) the Insured's child or children, jointly; (c) the Insured's parents, jointly, or to the surviving parent; (d) the Insured's brothers and sisters, jointly; or (e) the Insured's estate.

31. How are benefits claimed?

A. To claim benefits, fill out a Claim Form (M18979). See Section 6, How to File a Claim. Note: The council will need to review all claim forms and report serious accidents to its liability insurance carrier. Liability policies often provide medical payments. These may be in addition to plan benefits or in lieu of.

Check with your agent/broker.

32. For coverage or claim questions, how do we contact United of Omaha?

A. Mutual of Omaha's toll-free number is: 1-800-524-2324